



Frank P. Prager  
Assistant General Counsel

4653 Table Mountain Drive  
Golden, Colorado 80403

January 30, 2004

**PUBLIC  
DOCUMENT**

Mr. Paul R. Peronard  
U.S.E. P.A., Region VIII  
999 18<sup>th</sup> St., Suite 500  
Denver, CO 80202-2405

Dear Mr. Peronard:

Pursuant to Paragraph 76 of the administrative order on the Poudre River site,  
enclosed is Public Service Company of Colorado's certificate of insurance.

If you have any questions please feel free to give me a call.

Thank you.

A handwritten signature in black ink that reads 'Frank Prager'.

Frank Prager  
Assistant General Counsel

cc: Matthew Cohn  
Terry Staley  
Lauren Buehler

**MARSH****CERTIFICATE OF INSURANCE**CERTIFICATE NUMBER  
CHI-001117055-02**PRODUCER**Marsh USA Inc.  
333 South 7th Street, Suite 1600  
Minneapolis, MN 55402-2400

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER OTHER THAN THOSE PROVIDED IN THE POLICY. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES DESCRIBED HEREIN.

**COMPANIES AFFORDING COVERAGE****COMPANY**

A ACE AMERICAN INS CO

**COMPANY**

B

**COMPANY**

C

**COMPANY**

D

ONCE -PSCC-SIGAW-

**INSURED**PUBLIC SERVICE COMPANY OF COLORADO  
XCEL ENERGY INC.  
243 LIPAN STREET  
DENVER, CO 80223-1317**COVERAGES**

This certificate supersedes and replaces any previously issued certificate for the policy period noted below.

THIS IS TO CERTIFY THAT POLICIES OF INSURANCE DESCRIBED HEREIN HAVE BEEN ISSUED TO THE INSURED NAMED HEREIN FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THE CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, CONDITIONS AND EXCLUSIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	<b>GENERAL LIABILITY</b>	HDO G21731857	08/01/03	08/01/04	GENERAL AGGREGATE \$ 20,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS - COMP/OP AGG \$ 2,000,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				PERSONAL & ADV INJURY \$ 2,000,000
	<input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE \$ 2,000,000
					FIRE DAMAGE (Any one fire) \$ 2,000,000
					MED EXP (Any one person) \$ 10,000
					COMBINED SINGLE LIMIT \$ 2,000,000
A	<b>AUTOMOBILE LIABILITY</b>	ISA H07944287	08/01/03	08/01/04	BODILY INJURY (Per person) \$
	<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> ALL OWNED AUTOS				PROPERTY DAMAGE \$
	<input type="checkbox"/> SCHEDULED AUTOS				
	<input checked="" type="checkbox"/> HIRED AUTOS				
	<input checked="" type="checkbox"/> NON-OWNED AUTOS				
	<b>GARAGE LIABILITY</b>				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY:
					EACH ACCIDENT \$
					AGGREGATE \$
	<b>EXCESS LIABILITY</b>				EACH OCCURRENCE \$
	<input type="checkbox"/> UMBRELLA FORM				AGGREGATE \$
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM				
A A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>	WLR C43520891 SCF C43520854 (WI & MA)	08/01/03 08/01/03	08/01/04 08/01/04	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER \$ 2,000,000
	<input type="checkbox"/> THE PROPRIETOR/ PARTNERS/EXECUTIVE OFFICERS ARE:				EL EACH ACCIDENT \$ 2,000,000
	<input type="checkbox"/> INCL <input type="checkbox"/> EXCL				EL DISEASE-POLICY LIMIT \$ 2,000,000
					EL DISEASE-EACH EMPLOYEE \$ 2,000,000
	<b>OTHER</b>				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS  
RE: POUDRE RIVER SITE\***CERTIFICATE HOLDER**EPA REGION VIII  
999 - 18TH STREET  
SUITE 300  
DENVER, CO 80202**CANCELLATION**SHOULD ANY OF THE POLICIES DESCRIBED HEREIN BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE INSURER AFFORDING COVERAGE WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED HEREIN, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER AFFORDING COVERAGE, ITS AGENTS OR REPRESENTATIVES, OR THE ISSUER OF THIS CERTIFICATE.

MARSH USA INC.

BY: Jean Stephanie

MM1(3/02)

*Jean Stephanie*

VALID AS OF: 01/21/04